COMMUNICATION SKILLS IN PHARMACY PRACTICE.

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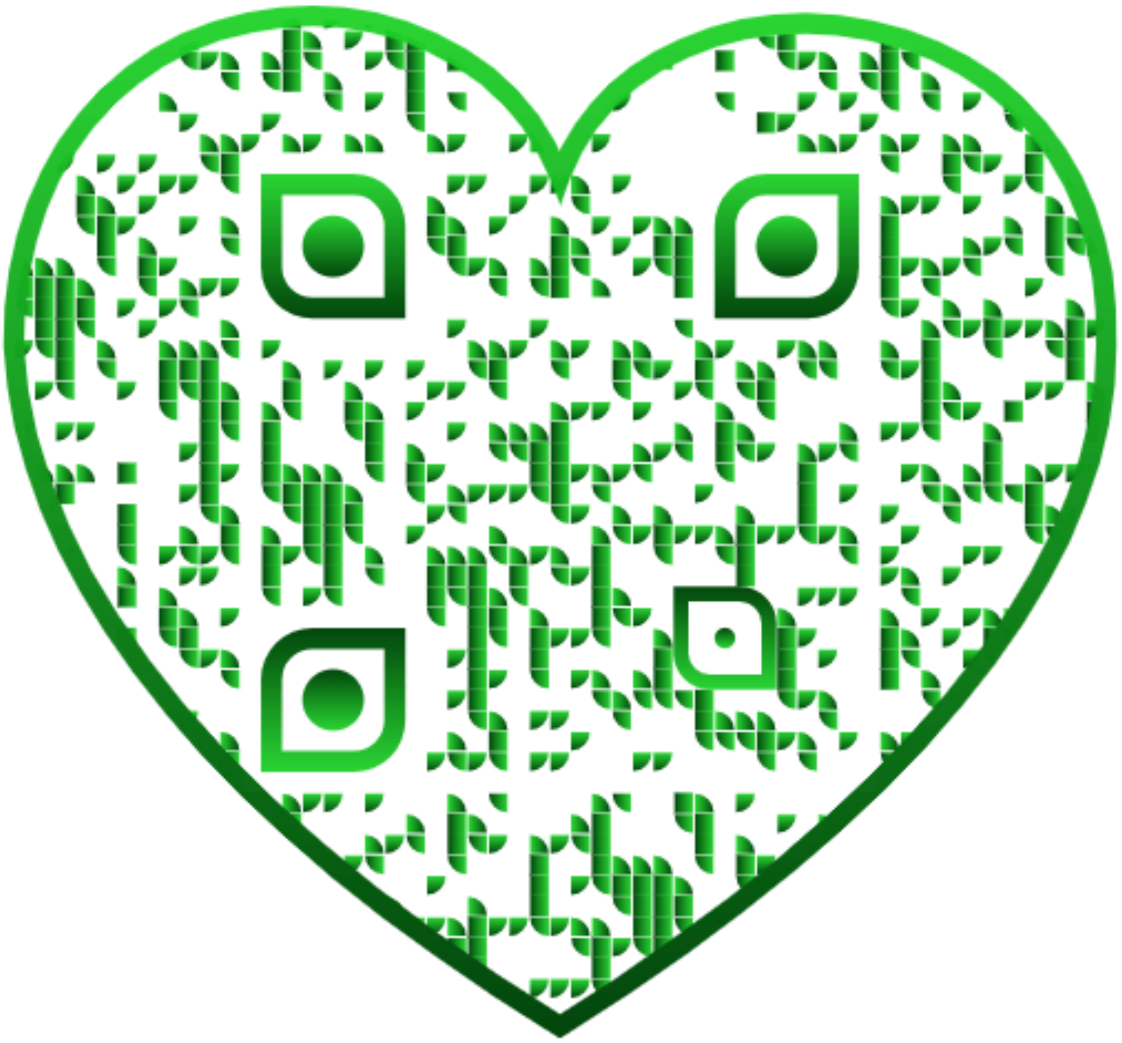

COMMUNICATION SKILLS IN PHARMACY PRACTICE.

Communicating with Children About Medicines

COMMUNICATION SKILLS IN PHARMACY PRACTICE.

Objectives:

A) The need for educating children and their parents about medicines,

B) the importance of using a patient-centered style with children and parents,

C) how to understand the cognitive developmental level of a child,

D) strategies for communicating with and empowering children at different ages about their medicines,

E) what children want to know about medicines at different ages

F) assessing family barriers to medication adherence.

A) Need for Educating Children and Their Parents About Medicines

- A study of Wyoming pharmacists that pharmacists reported considerable contact with children and their families and that most pharmacists (87%) reported filling prescriptions for children daily. As in the figure.

35% reported that they rarely communicated with the child.
32% reported doing so some of the time
33% claimed they did so most of the time

summary of the need for educating children and their parents about medicines:

1. Parents and children often lack knowledge about medicines.
2. This lack of knowledge can lead to medication errors
3. Pharmacists can play an important role in educating parents and children about medicines.
4. Educating children about medicines can help them to become more responsible for their own health.
5. Talk to children at their level

B) the importance of using a patient-centered style with children and parents

B) the importance of using a patient-centered style with children and parents

- A patient-centered style is one in which the health care provider seeks the child's opinions about treatment and empowers the child to seek information.
- To further understand why it is important to educate both parents and children, we need to examine some of the previous work on pediatrician–child–parent communication.
- The researchers did find that if physicians used a patient-centered style with children, this was associated with five times more talk with children and higher parent ratings of good care.
- Previous work in both adults and children has shown that patients are more adherent to medicine regimens and have better outcomes if they are taught about their disease and are included in treatment decisions.

B) the importance of using a patient-centered style with children and parents

Patient-Centered Interaction with Children and Parents

- Investigate any concerns or fears both the child and the parents might have about the medicine.
- Ask both the child and the parents about priorities for improved quality of life.
- If the child is on continued therapy, assess how well both the child and the parents perceive the medicine is working.
- Offer to call the pediatrician to suggest possible changes in therapy if needed based on what you learn from the child and the parents.
- Ask both the child and the parents what questions they have about the medicine.
- Educate both the child and the parents about the medicine by communicating directly with the child when possible.

Understanding the cognitive Developmental Level of a Child.

C) Understanding the Cognitive Developmental Level of a Child

- **A discussion of the developmental level of children will help you understand how to educate children at different ages and developmental levels about their medicines.**

- **Children progress through four stages based on the development of thinking skills in children.**

(a) **the sensory motor stage,**
(b) **the preoperational stage,**
(c) **the concrete operational stage, and**
(d) **the formal operational stage.**

- **It is very important to remember that not all children pass through the stages at the same rate.**

C) Understanding the Cognitive Developmental Level of a Child

1- PRE-OPERATIONAL (AGE 2 TO 7 YEARS)

- Sample educational message:

➢ **The medicine you'll get will go into your body and make your throat feel better. It will work only if you take it 3 times every day. Your mom will help you know when to take the medicine and when to stop taking the medicine.**

- **Be sure to use all the medicine, even if you think you're feeling better.**

C) Understanding the Cognitive Developmental Level of a Child

2- CONCRETE OPERATIONAL STAGE (AGE 7 TO 12 YEARS)

- **Sample educational message:**

➢ **This medicine will go into your body to help fight off the germs that are causing the infection in your throat. The medicine will work only if you take it 3 times a day until . . . (date treatment should end). If you don't take it this way, the infection might come back. So keep taking the medicine, even if you think you're feeling better. Work with your mom or dad, so you both know you have taken the medicine at the right times.**

C) Understanding the Cognitive Developmental Level of a Child

3- FORMAL OPERATIONS STAGE (AGE 13 YEARS TO ADULTHOOD)

- Sample educational message:

➢ **The medicine you're getting will go into your system to help your immune system fight off bacteria that are causing your infection. You have strep throat, which is when a particular form of bacteria causes an irritation in your throat. The medicine used to treat these bacteria is an antibiotic. You have to take it every 8 hours—that is, 3 times a day—for the next 10 days. If you don't do this, there is a chance you will be reinfected. Keep taking your medicine until it is gone, even if you think your throat is better.**

D) strategies for communicating with and empowering children at different ages

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General Principles for Communicating with and Empowering Children.

1. Attempt to communicate at the child's developmental level.
2. Tell the parent that you are going to talk with the child.
3. Use simple declarative sentences for all children.
4. Ask the child whether he or she has questions for you.
5. Pay attention to nonverbal communication.
6. Start with some general questions about other things to get an idea of the child's developmental level.
7. when you interact with children, you need to be aware of your facial expressions, tone of voice, and gestures.
8. Also, try to get down to their level so you will not be "talking down" to them.

E) Toddlers and Preschool Children

- **toddlers and preschool children may not be as actively involved in learning about medicines as older children.**

- **A good way to begin an encounter with toddlers and preschool children is to start with a simple friendly greeting and then do an enthusiastic but brief examination of one of the child's toys.**

E) Toddlers and Preschool Children

- **“It’s good to have an icebreaker for kids.**
- **I always have a stash of bouncy balls and do a ‘magic trick.’**
- **Once one has gained their attention and confidence, giving instructions becomes much easier.”**
- **At this age, it is important to begin educating children in simple terms as to what the medicine is for and why it is important to take it.**

F) SCHOOL-AGE CHILDREN

- Children ages of 6 or 12 years, when you educate them and their parents about their medicines.
- Through some simple questions such as "Why do you need to take this medicine?" or "How does the medicine work?"
- How they worked, when they should be taken, and at which doses.

F) SCHOOL-AGE CHILDREN

- You can also start to empower the child to begin to have some autonomy in medicine taking by saying "work with your mom or dad in taking the medicine" instead of "do not take the medicine unless your mom or dad is there."

- Children with chronic conditions such as diabetes, epilepsy, or asthma, may have a very good understanding of their disease and medicines.

ADOLESCENTS

- Pediatricians often ask parents to leave the room so they can communicate privately with adolescent children. Pharmacists can use the same technique. This allows you to build trust with the patient.

- In general, you can typically give teenagers educational messages that would be equivalent to what you would give an adult.

SUMMARY

- **Communicating with and empowering children and parents to better understand their child's medical condition and medication regimen can potentially improve patient adherence.**

- **Pharmacists need to make sure to use an empowering "patient-centered" interaction style when interacting with parents and children.**

SUMMARY

- International Pharmacy Federation adopted a Statement of Principle, The Pharmacist's Responsibility and Role in Teaching Children and Adolescents about Medicines.

- Pharmacists need to remember to assess the cognitive developmental level of children through the use of open questions.

SUMMARY

These three principles are an excellent summary of what you have learned in this chapter:

1. Children want to know. Health care providers and health educators should communicate directly with children about medicines.

2. Children's interest should be encouraged, and they should be taught how to ask questions of health care providers, parents, and other caregivers about medicines and other therapies.

3. Children's medicine education should take into account what children want to know about medicines, as well as what health care professionals think children should know.

Thank
you